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Claims:

1. A method of widening a penis wherein a dermal fat graft comprising a block of fat and attached dermis is excised from the patient, the penis is degloved, the dermal fat graft is sutured to the exposed Bucks fascia and then reducing the penile skin; said method further including the step of following a post-operative treatment regime.
2. The method as claimed in Claim 1 wherein the dermal fat grafts are harvested from either the buttocks, lower back or lower abdomen.
3. A method of widening a penis substantially as herein described.
4. A method of lengthening the penis of a male which includes the steps of placing the suspensory ligament under tension in the inferior direction; dividing the suspensory ligament against the body of the symphysis pubis down to the inferior pubic arch and along the inferior surface of both the right and left conjoined inferior pubic rami; effecting suturing to retain the penis released from the suspensory ligament in an inferior position by coapting the proximal medial attachments of the right and left gracilis muscle together ventral the released penis, dividing the fundiform ligaments, drawing the skin of the junction

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site of the scrotum and the perineum mediosuperiorally so as to attach it to the symphysis pubis thereby pushing the skin adjacent thereto along the newly exposed shaft of the penis and suturing this to retain this position; said method further including the step of following a post operative treatment regime.

5. The method of Claim 4 followed by the insertion of additional sutures through the anterior surface of the symphysis pubis; said sutures also placed through the margins of the pubic skin wound and tied in such a manner as to pull suprapubic skin down infrapubically.

6. The method of Claim 5 wherein the number of said additional sutures inserted is 1 or more.

7. The method of Claim 6 wherein the number of said additional sutures is determined by the width of the symphysis pubis.

8. The method of any of Claims 4 to 7 including the step of dividing the fundiform ligament prior to said step of drawing the skin of the junction site of the scrotum.

9. A method of widening a penis wherein a block of fat and attached dermis (dermal fat graft) is excised from the patient, the penis is degloved, the dermal fat graft is sutured to the exposed Bucks fascia and then reducing the penile skin.

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10. A method as claimed in Claim 9 wherein the dermal fat grafts are harvested from either the buttocks, lower back or lower abdomen.
11. A method of lengthening and widening a penis, the
5 lengthening using the method as claimed in Claim 4 and the widening using the method as claimed in Claim 1 wherein the dermal fat graft is sutured to the exposed Bucks fascia prior to the tying of the sutures which maintain the lengthening of the penis.
- 10 12. A method of lengthening the penis of a male substantially as herein described.
13. A method of widening a penis substantially as herein described.
14. A method of lengthening and widening a penis
15 substantially as herein described.
15. A method of enhancement phalloplasty of a human penis in patients who are about to have or already have in place an artificial erection device; said penis having a structure including a first corpus cavernosum, a second
20 corpus cavernosum, a corpus spongiosum, a Buck's fascia and a dorsal neurovascular bundle; said method including the steps of degloving the penis to expose the Buck's fascia; freeing the dorsal neurovascular bundle and separating the corpus spongiosum from the inferior

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surface of both said first and said second corpus cavernosum; dividing said first and second corpus cavernosum circumferentially; said method further including the step of following a post-operative treatment regime.

16. The method as claimed in claim 15 wherein said step of separating the corpus spongiosum from the inferior surface of both said first and said second corpus cavernosum comprises a dissection so as to enable the first and second corpus cavernosum to be elongated without dividing the corpus spongiosum.

17. The method as claimed in claim 15 or claim 16 wherein said artificial erection device comprises a corporal cylinder which is longer than the corporal cylinder presently in place, either where the patient already has an artificial erection device in place or longer than the corporal cylinder which was measured when the corporotomy and dilatation of the corpus was performed earlier in the procedure.

18. A method as claimed in claim 16 wherein the increase in length of the corporal cylinder is of the order of one or more cm.

19. A method as claimed in any one of claims 15 to 18 wherein a gap formed in the first or second corpus

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- cavernosum is filled by suturing in place an inverted dermal graft from which the epidermis has been removed.
20. A method as claimed in claim 19 wherein the dermo epidermal surface is the inner most surface applied to the corporal cavity.
- 5 21. A method of enhancement phalloplasty as claimed in any one of claims 15 to 20 wherein widening of the penis is also required and wherein widening is effected by using a dermal fat graft.
- 10 22. The method of claim 21 wherein the fat graft is sutured to the exposed Bucks fascia and when the graft reaches a defect in the Buck's fascia corresponding to the division of the first or second corpus cavernosum the edges of the graft are sutured to the Buck's fascia circumferentially and to a distal portion of the first or second corpus cavernosum without dividing the graft as a separate phenomenon.
- 15 23. A method of enhancement phalloplasty as claimed in claim 22 wherein if the patient has a very thickened wall of the first or second corpus cavernosum, a first dermal fat graft is placed into the defect in the Buck's fascia and then a second dermal fat graft is placed into the defect.
- 20 24. A method of enhancement phalloplasty as claimed in claim

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23 wherein if the patient has a very thickened wall of the corpus cavernosum, the gap in the wall of the corpus cavernosum is filled by using a gortex graft, a saphenous or other vein patch, temporalis or other fascia such as the fascia lata or dextron mesh or silastic sheeting or other appropriate material and then said second dermal fat graft is applied.

25. A method as claimed in any one of claims 15 to 24 further including an additional step wherein the degloved penis is reduced and the proximal wounds are trimmed and closed in layers.

26. A method of lengthening and widening a penis, the lengthening using the method as claimed in any one of claims 1 to 25 wherein a block of fat and attached dermis (dermal fat graft) is excised from the patient, the penis is degloved, the dermal fat graft is sutured to the exposed Bucks fascia prior to the tying of the sutures which maintain the lengthening of the penis.

27. A method of enhancement phalloplasty substantially as hereinbefore described with reference to the examples of the particular operations given in the specification.

28. A method for penile enlargement further including the step of application of a post-operative treatment regime thereby to maintain outcome of enlargement.

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29. A method of penile enlargement further including the step of application of a post-operative treatment regime.
30. The method of claims 28 or 29 wherein penile enlargement
5 comprises one or more of lengthening or widening.
31. The method of any previous claim further including the step of treatment for buried penis condition.
32. The method of any previous claim wherein said post-operative treatment regime comprises application of a
10 drug treatment regime.
33. The method of any previous claim wherein said post-operative treatment regime comprises application of an exercise regime.
34. An exercise regime for application following application
15 of the method of any previous claim.
35. A drug treatment regime for application following application of the method of any one of claims 1 to 33.